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CONSERVATION OF VISION.

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Societies for the Conservation of Vision have been formed in various portions of the United States. They exist under different conditions. The membership in some is medical and in others, lay and medical.

In Pennsylvania, Indiana, Missouri, etc., the organization exists as a Committee of the State Medical Society; in New York, Illinois, etc., independent associations have been formed; in Ohio the "Commission," as it is called, is a part of the state government. There is also a National Association, independent in its nature, and mixed in its membership. Some of these associations, such as New York, Massachusetts, Maryland, Ohio, etc., are doing energetic work, while others are inactive and almost useless.

At the 1913 meeting of the American Medical Association, the Council on Health and Public Instruction appointed a Committee on Conservation of Vision, consisting of E. M. Alger, New York City; W. E. Bruner, Cleveland, Ohio; H. D. Bruns, New Orleans, La.; J. J. Carroll, Baltimore, Md.; E. C. Ellett, Memphis, Tenn.; Harold Gifford, Omaha, Neb.; Vard Hulen, San Francisco, Cal; W. B. Lancaster, Boston, Mass.; F. Park Lewis, Buffalo, N. Y.; William C. Posey, Philadelphia, Pa.; W. H. Wilder, Chicago, Ill.; Casey A. Wood, Chicago, Ill.; Hiram Woods, Baltimore, Md.; and Frank Allport, Chicago, Ill.; of this committee I was appointed chairman. The object of the committee was to produce interest and action in conserving vision, and to endeavor to concentrate under the auspices of the American Medical Association activities calculated to preserve the sight of this, and coming generations.

We began our work by utilizing the machinery of the American Medical Association. The Council on Health and Public Instruction sends out

each week a sheet called the *Press Bulletin*. This is sent free to nearly six thousand newspapers, and the printed matter upon its face can be used by the papers as editorials, news matter, etc. The printed matter consists of short, plainly written articles on health topics. They are unsigned. The council employs clipping bureaus, and through them it is ascertained that these articles are very extensively used. They are shaping public thought along medical lines in this country. The Conservation of Vision Committee has an appropriate article in the *Bulletin* each week, and its articles on "The Eyes and the Movies," "Face Powder and the Eyes," "Cross-Eyes," "Illumination in Homes, Offices, Schools, etc.," "Golf Accidents to the Eyes," "What is a Cataract," etc., have been extensively copied all over the country. The committee feels that this is a most important part of its work—as it reaches so many people, and is under direct control.

The next work of the committee was to write, print and circulate twenty pamphlets on popular eye topics. These are called *The Conservation of Vision Pamphlets* and are numbered from one to twenty. They are handsomely gotten up, in uniform style. The authors' names are given. They are short and plainly written, so that non-medical people can easily understand them. They are well illustrated. They sell for five cents a copy, or one hundred copies for \$3.50. They are also freely given away on proper application to either me, as chairman of the committee, or to Dr. F. R. Green, Council on Health and Public Instruction, American Medical Association, 535 North Dearborn Street, Chicago, Ill. Sets of these pamphlets have been sent to public libraries, women's clubs, teachers' institutes, state legislatures, health boards, etc., all over the United States, and the sale and distribution has been extensive. Some of the pamphlets are already in their third edition. Arrangements are being made to distribute Doctor Carroll's Pamphlet on the "Eyes of Transportation Employees" to every railroad surgeon in the United States. I give here a list of the pamphlets:

- Pamphlet I. School Children's Eyes, by Dr. Frank Allport, Chicago.
- Pamphlet II. Industrial and Household Accidents to the Eye, by Dr. Harold Gifford, Omaha.
- Pamphlet III. Wearing Glasses, by Dr. W. B. Lancaster, Boston.
- Pamphlet IV. The Relation of Illumination to Visual Efficiency, by Dr. Ellice M. Alger, New York.
- Pamphlet V. Trachoma in Eastern Kentucky, by Dr. J. A. Stucky, Lexington, Ky.
- Pamphlet VI. Auto-Intoxication and the Eye, by Dr. H. D. Bruns, New Orleans.
- Pamphlet VII. Eye-Strain, by Dr. Hiram Woods, Baltimore.
- Pamphlet VIII. Lenses and Refraction, by Dr. Frank Allport, Chicago.
- Pamphlet IX. The Eye and Its Functions, by Dr. Frank Allport, Chicago.
- Pamphlet X. Care of the Eyes, by Dr. Frank Allport, Chicago.
- Pamphlet XI. Infant Blindness, or Ophthalmia Neonatorum, by Dr. F. Park Lewis, Buffalo, N. Y.

- Pamphlet XII. Ordinary Eye Diseases, by Dr. L. W. Dean, Iowa City, Iowa.
- Pamphlet XIII. Usual and Unusual Eye Accidents, by Dr. E. C. Ellett, Memphis, Tenn.
- Pamphlet XIV. The Eyes of Transportation Employees, by Dr. J. J. Carroll, Baltimore.
- Pamphlet XV. Ocular Hygiene in Schools, by Dr. S. D. Risley, Philadelphia.
- Pamphlet XVI. Whisky, Tobacco and Drugs and the Eyes, by Dr. Edward Jackson, Denver.
- Pamphlet XVII. The Oculist and the Optician, by Dr. Melville Black, Denver.
- Pamphlet XVIII. Preparation for Blindness, by Dr. F. Park Lewis, Buffalo.
- Pamphlet XIX. What to Do for Blind Children, by Dr. F. Park Lewis, Buffalo.
- Pamphlet XX. Blindness from Wood Alcohol, by Dr. Casey Wood, Chicago.

I would like to suggest that these are excellent pamphlets for doctors to keep in their offices and on their reading tables for distribution and education. I am constantly giving away these pamphlets to patients who, having seen them, desire them. Some people wish information on one subject and others desire knowledge along other lines. The pamphlet topics are sufficiently varied to fill the wants of most people. Besides this it often happens that an oculist desires to instruct a certain patient on a particular subject. Almost all eye subjects are mentioned in these pamphlets and are plainly and understandingly discussed, and it would be far easier to give such patients an appropriate pamphlet or two than to take the time to explain the subject personally.

It seemed desirable to the committee to create a national sentiment in favor of conservation of vision, and for this purpose it was determined that lectures on this subject should be delivered in each state. A lecture bureau manager was appointed in each state who was willing to superintend the work in his state. Where a state organization for the conservation of vision existed, one of its officers was selected to carry on the work; but where no such state organization existed a prominent, energetic and willing oculist was selected. The plan was about as follows:

The "state manager," as he is called, should enlist the assistance of all the oculists he could to assist him in his work, acting, wherever possible, in harmony with local and state medical societies, both ophthalmological and general. Prominent and energetic oculists should be found who were willing to lecture on the Conservation of Vision on invitation. Such lecturers should reside in different portions of the state, so that long and expensive journeys should not be necessary. The state manager should correspond with local medical societies, women's clubs, teachers' institutes, boards of health and education, etc., and secure invitations for a lecturer to go to different cities to talk on the Conservation of Vision. Lectures should, if possible, be arranged for one month in advance, to give time for preparation, and necessary ethical advertising. The lecturers expenses should, if possible, be paid for by the ones issuing the invitation. The lecture should last about one hour and should be given in plain and un-

scientific language. A discussion should follow. In order to make these lectures easy to deliver, the committee prepared a box of about thirty colored and uncolored stereopticon slides and sent them to each state manager, to be loaned to his associates in the work whenever a lecture was to be delivered. These slides were securely packed in a strong box and locked with a Yale key. The box could be shipped from place to place by express, the key going to its destination by mail. In addition to this a pamphlet was prepared entitled "A Plan of Campaign for the Conservation of Vision." This pamphlet contained a full description of the plan, and what it was proposed to accomplish. A kind of skeleton lecture was included in this pamphlet suggesting subjects, etc., to be referred to in the lecture. These pamphlets were freely dispensed to all state managers, who distributed them to their associates in the work. Besides this, each lecturer was placed on the mailing list for the *Press Bulletin*, to which reference has already been made, so that he could see the new articles as they came out each week, and perhaps use them in his lectures. Each lecturer also received a complete set of the *Conservation of Vision Pamphlets*, as it was thought that these would greatly assist him in preparing his lectures. Quantities of the "Vision Charts for Schools," were sent into each state so that the lecturers could have all they desired of them. While these lectures were intended to cover all avenues of vision conservation, it was especially hoped that it would result in the use of the Credé treatment of the eyes of all new-born babes; in the lessening of shop accidents; and in the annual and systematic examination of all school children's eyes by school teachers; for it is reasonably certain that if these three procedures could be universally adopted, 80 per cent. of all blindness could be eliminated from this country. The Credé treatment for new-born infants, the providing and using of goggles and other shop safety devices for eyes, and the annual, systematic examination of school children's eyes, ears, noses and throats by school teachers in the United States could be accomplished at an annual cost which would not exceed \$250,000 per annum. It costs \$15,000,000 a year to care for the dependent blind in this country alone, to say nothing of those children more or less incapacitated by defective or diseased ears, noses and throats. Inasmuch as the examination of ears, noses and throats is provided for in the questions annexed to the vision chart, for the teachers' use, and as abnormal conditions of these organs can be investigated easily and speedily, at the same time the eyes are examined, and as the benefits to be achieved by this addition are enormous, it is earnestly recommended that teachers will include the ears, noses and throats in their investigations.

Emphasis should be laid on several points connected with these annual, systematic examinations of school children's eyes, etc., by school teachers.

First. The examinations are simple and require no medical education.

Second. Teachers are not expected to make diagnoses. They merely ascertain the fact through the questions, that something is wrong, and leave the rest to the doctor selected by the family for consultation.

Third. A child can be easily examined in five minutes and each teacher should examine the children attending her own room. By subdividing the work in this way, all the children in any city of any size can be easily examined in one day. A definite day in the early fall of each year should be set aside for these tests in all cities.

Fourth. These tests not only benefit the children by leading to the correction of their eye, ear, nose and throat defects, but the correction of these defects *benefits the teachers*, because such corrections usually add materially to the intellectual and moral character of the children, thus rendering them much easier to teach, and more pliable to discipline. Teachers should, therefore, be glad to do this work, without grumbling, both from selfish and unselfish reasons.

Fifth. There is no objection to these examinations being made by doctors or school nurses. This, however, would cost large sums of money and boards of education and health are never allowed enough money for even ordinary purposes. This is a fact which might as well be frankly recognized and acted upon. Let teachers, therefore, devote one day in the year to this work and get it done. They are easily capable of doing it. It takes no extra time for them. It is a benefit to themselves as well as to the children. It costs practically nothing. Therefore, let it be done.

The question may be pertinently asked, what has been the result of the state lectures? This has varied greatly in different states. No man was compelled to accept the position of state lecture bureau manager; the acceptance was voluntary and was decided after the work and ideals were thoroughly explained. After a promise of conscientious work was given, the box of slides and printed matter were sent, which represented an outlay of about twenty-five dollars in money, for each state. In some states this (at least, so far as results are concerned) has ended the matter. So far as I know, no work whatever has been done in some states; no lectures have been delivered; and nothing has been accomplished. My letters have been unanswered; my appeals have been unheeded. Perhaps a letter has been finally, at the end of the season, received, informing me that I do not understand conditions in that particular state, or that sickness, or business, or moving, or bad weather, or some equally important reason has prevented taking up the lecture proposition. Of course, after a gentleman accepts a position of this kind, and agrees to do the work, I felt I had a right to depend upon his coöperation, and, having once appointed him, the state was left in his charge and I felt I had no right to interfere. It has been, therefore, most discouraging for me at the end of the season, when

it was about time for me to make my report to the Council on Health and Public Instruction, and when it was too late to change state managers, to realize that no *real* work had been accomplished in quite a number of states. In some states the work for one reason or another has been delayed, but still work has been done, as many lecture engagements have been made for next fall with medical societies, teachers' institutes, Chautauqua meetings, women's clubs, educational conventions, etc. But I rejoice to say that in most of the states honest, conscientious work has been accomplished, and excellent results have been achieved. The results are, of course, not all that could be desired, but still, considering that this is the first year of the committee's existence, I should be ungrateful, indeed, if I did not feel gratified and much obligated to those gentlemen who have given this project their time, their labor, and their means. I beg to present, toward the end of this article, a tabulated report of this work up to the time of giving this narrative into the hands of the printer.

The question as to the future of this work now remains to be discussed. I would recommend:

First. The continuance of a weekly article on the eye for the *Press Bulletin of the Council on Health and Public Instruction*.

Second. A few more *Conservation of Vision Pamphlets* on interesting subjects and the increased circulation of these pamphlets.

Third. The continuation of the conservation of vision lectures in the various states. Many more of these lectures should be delivered, and the state managers should be changed, where the present managers have not shown a reasonable interest in the work. From twenty to twenty-five new slides for the stereopticon should be made, that will more fully illustrate the subject.

Fourth. I was at first in favor of encouraging the formation of State Societies for the conservation of vision, these societies to possess complete self government, but all of them to declare themselves in affiliation with the Committee on Conservation of Vision, of the Council on Health and Public Instruction of the American Medical Association, by a slender thread of connection. I was also in favor of asking those states, already possessing state organizations, to join with us in the same sort of affiliation. I was also in favor of proposing an annual meeting of this affiliated organization and the formation of a national body of this nature for the conservation of vision. Time and experience have, however, considerably modified my views and I now believe that other plans are better.

In the first place, there is already a national society of this nature. It is, it is true, highly inactive but still it exists and should, I believe, be encouraged to an awakening activity.

In the second place, local conditions, in many of the states, are not conducive to friendly assistance. However well meant such assistance

may be, it will, in some states, be regarded as meddling interference, and as an effort to rob existing organizations, whether active or lethargic, of some credit, which it is felt should remain with the local organization, and not be shared with even a well intending interloper. These views, I presume, are but natural to those people who have worked hard to develop a praiseworthy state society. They want the credit for their work and should have it, and I believe it is better that they should be let alone, and not asked to merge their identity or work with that of another organization. My recommendation, therefore, for the future is, that this committee shall do what it can to inspire the formation of state conservation of vision organizations, either as independent medical and lay societies, or as commissions of the state governments. It shall stand ready to advise and assist such work in any possible manner, but it shall not suggest a formal connection of any description, with the Committee of the American Medical Association. This committee should also be equally ready to advise or assist state organizations that already exist, and should cooperate with them in any way they may properly request.

Fifth. I would recommend that the work of this committee be extended, so that it shall become a potent power in the community. It should have a central office with a paid, interested, intelligent, energetic secretary, who could and would from time to time journey from state to state, upon request, and assist in the formation and perpetuation of state societies for the conservation of vision. His traveling expenses should be paid by those who summon him to the various localities. He should have a well equipped office, with one or two stenographers, and a library and files, containing *everything* that is printed on the conservation of vision. This office should be recognized as a central bureau of assistance, advice, literature, laws, etc., where all questions concerning this subject can and will be intelligently and willingly answered. Plans should here be devised for the formation of societies; for constitutions and by-laws; for the best ways of carrying on the work; for the building of model laws; and the best means of influencing legislatures and boards of health, education, etc. The work of such an office would be enormous and its influence widespread. Its work and purposes would enlarge and develop as time progressed, and I do not see how this noble enterprise can reach its legitimate and ultimate purpose unless something of this kind is made possible. But to do this, considerable money would be absolutely necessary, and I, therefore, recommend that this money shall be forthcoming from some source and that the good work shall be encouraged to go on.

Sixth. The distribution in all schools of crisply and plainly written leaflets concerning the care of eyes, ears, noses and throats. They should be taken home so that the parents can read them. They should be printed in various languages.

Perhaps even a better plan would be to have suggestions of this kind printed on the blank fly-leaf of all school books. The expense of printing would be almost nothing and the benefits to be derived would be incalculable.

I wish to thank Dr. H. B. Favill, Dr. F. R. Green and the Council on Health and Public Instruction for the moral and financial assistance they have rendered our committee. I also wish to thank all those who have written for the *Press Bulletin* and the *Conservation of Vision Pamphlets*. I also wish to thank all those who have assisted us in the work of the state lecture bureaus.

No.	State.	Manager.	Number of lectures.	Number of lecturers.	Number of cities.	Estimated size of audiences.
1	Ga.	Dunbar Roy	10	10	10	1,975
2	S. C.	C. W. Kollock	10	8	6	950
3	Ala.	S. Ledbetter	8	6	7	1,000
4	Ore.	J. L. McCool	3	1	1	300
5	N. C.	C. W. Banner	7	4	4	2,000
6	Kans.	R. S. Magee	7	5	6	1,050
7	N. H.	E. Fritz	8	7	8	1,725
8	Wyo.	G. L. Strader	1	1	1	100
9	Tenn.	E. C. Ellett	4	4	4	850
10	N. Y.	F. P. Lewis	2	2	2	225
11	Ark.	H. Moulton	5	4	5	400
12	Mo.	C. Loeb	15	12	8	2,300
13	Utah	D. M. Lindsay	25	12	24	4,675
14	Me.	J. A. Spalding	23	14	20	3,000
15	N. D.	J. H. Rindlaub	19	8	19	4,000
16	Conn.	G. H. Warner	2	1	2	850
17	Wash.	R. W. Perry	13	6	10	1,520
18	Md.	H. Woods	14	7	7	8,050
19	Ohio	W. E. Bruner	59	39	59	14,300
20	Ky.	J. A. Stucky	35	2	35	10,350
21	Del.	J. A. Ellegood	3	2	3	675
22	Idaho	R. L. Nourse	2	1	1	525
23	Va.	J. A. White	4	4	2	500
24	Minn.	F. C. Todd	3	3	3	500
25	Iowa	E. R. Lewis	3	3	3	500
26	Wis.	N. M. Black	1	1	1	250
27	Wash., D. C.	O. Wilkinson	2	1	2	200
28	Mich.	W. R. Parker	4	1	3	1,430
29	Ind.	A. E. Bulson, Jr.	45	20	25	5,000
30	Neb.	J. M. Patton	2	1	2	225
			339	190	283	69,425

I append a tabulated report of the State Lecture Bureau Campaign and desire to say that a large part of the work done in Ohio has been done under the auspices of the Ohio Commission for the Blind.

It will thus be seen that thirty states have reported work; 339 lectures have been delivered; by 190 lecturers; in 283 cities; to audiences aggregating, 69,425.

When to this is added the hundreds of thousands of people who have been reached through the newspapers, by the distribution of the *Press Bulletin*, and the thousands of people who have been reached by the *Conservation of Vision Pamphlets*, it will be seen that the work of this committee has not been in vain. I desire to also add that probably through the agency of the lectures, in the various states, school inspection of eyes, ears, noses and throats have been established in, at least, 200 cities.

7 West Madison Street.